24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	
	C C00448696
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	M M / D D / Y Y Y Y
Mailing Address PO Box 388	07 29 2014 Amount
City State Zip Code	1403.95
Alexandria VA 22313-0388	Transaction ID : EE0AF6565F21F4D85BCB Date of Disbursement or Obligation
Purpose of Expenditure IE-Wolf-Online Processing Category/ Type	07 29 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Milton Wolf Oppose	President X Senate State: KS
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M - M / D - D / T - T - T
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1403.95
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
(c) TOTAL independent Experiorities	1403.95
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Paul Kilgore	
[Electronically Filed] Date	07 29 2014
Signature	